

County: Marinette
WHISPERING OAKS CARE CENTER
620 HARPER AVENUE

Facility ID: 1400

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PESHTIGO 54157 Phone: (715) 582-4148
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 50
Total Licensed Bed Capacity (12/31/01): 59
Number of Residents on 12/31/01: 39

Ownership: Limited Liability Company
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 37

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		23.1
Supp. Home Care-Personal Care	No					1 - 4 Years		56.4
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	17.9	More Than 4 Years		20.5
Day Services	Yes	Mental Illness (Org./Psy)	28.2	65 - 74	7.7			-----
Respite Care	Yes	Mental Illness (Other)	12.8	75 - 84	46.2			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	2.6	85 - 94	15.4	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	12.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	5.1		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	20.5	65 & Over	82.1	-----		
Transportation	No	Cerebrovascular	5.1		-----	RNs		8.1
Referral Service	Yes	Diabetes	5.1	Sex	%	LPNs		14.6
Other Services	No	Respiratory	2.6		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	17.9	Male	43.6	Aides, & Orderlies		
Mentally Ill	No		-----	Female	56.4			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care		Managed Care			Total Resi - dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)				
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	2	100.0	225	30	93.8	101	2	100.0	113	3	100.0	118	0	0.0	0	0	0.0	37	94.9
Intermediate	---	---	---	2	6.3	84	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	2	5.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	2	100.0		32	100.0		2	100.0		3	100.0		0	0.0		0	0.0	39	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	30.9	Daily Living (ADL)	Independent			
Private Home/With Home Health	5.5	Bathing	10.3	41.0	48.7	39
Other Nursing Homes	0.0	Dressing	10.3	41.0	48.7	39
Acute Care Hospitals	63.6	Transferring	41.0	30.8	28.2	39
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	41.0	25.6	33.3	39
Rehabilitation Hospitals	0.0	Eating	69.2	12.8	17.9	39
Other Locations	0.0	*****				
Total Number of Admissions	55	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	2.6	Receiving Respiratory Care		20.5
Private Home/No Home Health	29.3	Occ/Freq. Incontinent of Bladder	35.9	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	8.6	Occ/Freq. Incontinent of Bowel	20.5	Receiving Suctioning		0.0
Other Nursing Homes	8.6			Receiving Ostomy Care		0.0
Acute Care Hospitals	29.3	Mobility		Receiving Tube Feeding		2.6
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	12.8	Receiving Mechanically Altered Diets		0.0
Rehabilitation Hospitals	0.0					
Other Locations	6.9	Skin Care		Other Resident Characteristics		
Deaths	17.2	With Pressure Sores	0.0	Have Advance Directives		0.0
Total Number of Discharges		With Rashes	2.6	Medications		
(Including Deaths)	58			Receiving Psychoactive Drugs		71.8

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group Ratio	Bed Size: 50-99 Peer Group Ratio	Licensure: Skilled Peer Group Ratio	All Facilities % Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	62.2	82.5 0.75	86.4 0.72	85.8 0.72	84.6 0.74
Current Residents from In-County	74.4	74.3 1.00	69.6 1.07	69.4 1.07	77.0 0.97
Admissions from In-County, Still Residing	7.3	19.8 0.37	19.9 0.37	23.1 0.31	20.8 0.35
Admissions/Average Daily Census	148.6	148.2 1.00	133.4 1.11	105.6 1.41	128.9 1.15
Discharges/Average Daily Census	156.8	146.6 1.07	132.0 1.19	105.9 1.48	130.0 1.21
Discharges To Private Residence/Average Daily Census	59.5	58.2 1.02	49.7 1.20	38.5 1.54	52.8 1.13
Residents Receiving Skilled Care	94.9	92.6 1.02	90.0 1.05	89.9 1.05	85.3 1.11
Residents Aged 65 and Older	82.1	95.1 0.86	94.7 0.87	93.3 0.88	87.5 0.94
Title 19 (Medicaid) Funded Residents	82.1	66.0 1.24	68.8 1.19	69.9 1.17	68.7 1.19
Private Pay Funded Residents	7.7	22.2 0.35	23.6 0.33	22.2 0.35	22.0 0.35
Developmentally Disabled Residents	0.0	0.8 0.00	1.0 0.00	0.8 0.00	7.6 0.00
Mentally Ill Residents	41.0	31.4 1.31	36.3 1.13	38.5 1.07	33.8 1.21
General Medical Service Residents	17.9	23.8 0.75	21.1 0.85	21.2 0.85	19.4 0.92
Impaired ADL (Mean)	50.8	46.9 1.08	47.1 1.08	46.4 1.10	49.3 1.03
Psychological Problems	71.8	47.2 1.52	49.5 1.45	52.6 1.37	51.9 1.38
Nursing Care Required (Mean)	3.2	6.7 0.48	6.7 0.48	7.4 0.43	7.3 0.44